

# Exhibit F



**IN THE UNITED STATES DISTRICT COURT  
FOR THE EASTERN DISTRICT OF VIRGINIA  
ALEXANDRIA DIVISION**

VIRGINIA COALITION FOR IMMIGRANT  
RIGHTS, *et al.*,

Plaintiffs,

v.

SUSAN BEALS  
*in her official capacity as Virginia Commissioner  
of Elections, et al.*,

Defendants.

Case No. 1:24-cv-1778 (PTG/WBP)

UNITED STATES OF AMERICA,

Plaintiff,

v.

COMMONWEALTH OF VIRGINIA, *et al.*,

Defendants.

Case No. 1:24-cv-1807 (PTG/WBP)

**DECLARATION OF JUDY BROWN**

I, Judy Brown, am employed by the Loudoun County, Virginia, Elections and Voter Registration Office ("Elections Office"). My official title is General Registrar, and I am a custodian of records for the Elections Office. I state that each of the records identified herein by Bates number is a true and correct duplicate of an official record in the custody of the Elections Office:

- a) USA-Loudoun-00001 to USA-Loudoun-00006
- b) USA-Loudoun-00007 to USA-Loudoun-00008



- c) USA-Loudoun-00009 to USA-Loudoun-00023
- d) USA-Loudoun-00024
- e) USA-Loudoun-00025 to USA-Loudoun-00050
- f) USA-Loudoun-00051 to USA-Loudoun-00170
- g) USA-Loudoun-00171 to USA-Loudoun-00186


Pursuant to 28 U.S.C. § 1746, I declare under penalty of perjury that the foregoing is true and correct.

Executed on October 22, 2024

  
JUDY BROWN



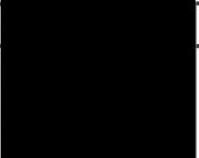




**Virginia Voter Registration Application**

Registration Type			
Voter ID		Registration Date	
SSN		Date of Birth	04/02/1997
Last Name		Gender	M
First Name		US Citizen	Yes
Middle Name			
Suffix			
Residence Address			
Locality	LOUDOUN COUNTY		
Mailing Address	Same as Residence		
Email		Phone	
Military, Overseas, or Address Indeliverable or Homeless	No	Felony conviction or judged mentally incapacitated?	No
Protected Voter Code		Right to vote restored?	
Pollworker Interest		Registered in another state?	No
I swear/affirm, under felony penalty for making willfully false material statements or entries, that the information provided for voter registration is true. I authorize the cancellation of my current registration and I have read the Privacy Act Notice.			
Signature			
Date Submitted	10/5/2024 1:24:18 PM	Transaction #	19413481
		VRA-OVR-2 09/2017	

NEW APP.  
ACTIVE VOTER




## Virginia Voter Registration Application


Registration Type			
Voter ID		Registration Date	
SSN		Date of Birth	04/02/1997
Last Name		Gender	M
First Name		US Citizen	Yes
Middle Name			
Suffix			
Residence Address			
Locality	LOUDOUN COUNTY		
Mailing Address	Same as Residence		
Email		Phone	
Military, Overseas, or Address Undeliverable or Homeless	No	Felony conviction or judged mentally incapacitated?	No
Protected Voter Code		Right to vote restored?	
Pollworker Interest		Registered in another state?	No
I swear/affirm, under felony penalty for making willfully false material statements or entries, that the information provided for voter registration is true. I authorize the cancellation of my current registration and I have read the Privacy Act Notice.			
Signature			
Date Submitted	5/4/2024 3:38:43 PM	Transaction #	18770355
			VRA-OVR-2 09/2017



**Virginia Voter Registration Application**

Registration Type			
Voter ID		Registration Date	
SSN		Date of Birth	04/02/1997
Last Name		Gender	M
First Name		US Citizen	Yes
Middle Name			
Suffix			
Residence Address			
Locality	LOUDOUN COUNTY		
Mailing Address	Same as Residence		
Email		Phone	
Military, Overseas, or Address Indeliverable or Homeless	No	Felony conviction or judged mentally incapacitated?	No
Protected Voter Code		Right to vote restored?	
Pollworker Interest		Registered in another state?	No
I swear/affirm, under felony penalty for making willfully false material statements or entries, that the information provided for voter registration is true. I authorize the cancellation of my current registration and I have read the Privacy Act Notice.			
Signature			
Date Submitted	3/26/2021 12:18:59 AM	Transaction #	14861643
		VRA-OVR-2 09/2017	




Registration Type			
Voter ID		Registration Date	
SSN		Date of Birth	10/16/2000
Last Name		Gender	M
First Name		US Citizen	Yes
Middle Name			
Suffix			
Residence Address			
Locality	LOUDOUN COUNTY		
Mailing Address	Same as Residence		
Email		Phone	
Military, Overseas, or Address Indeliverable or Homeless	No	Felony conviction or judged mentally incapacitated?	No
Protected Voter Code		Right to vote restored?	
Pollworker Interest		Registered in another state?	No
I swear/affirm, under felony penalty for making willfully false material statements or entries, that the information provided for voter registration is true. I authorize the cancellation of my current registration and I have read the Privacy Act Notice.			
Signature			
Date Submitted	9/22/2024 1:59:04 PM	Transaction #	4620889
		VRA-OVR-2 09/2017	

NEW APP,  
ACTIVE VOTER



**Virginia Voter Registration Application**

Registration Type			
Voter ID		Registration Date	
SSN		Date of Birth	10/16/2000
Last Name		Gender	M
First Name		US Citizen	Yes
Middle Name			
Suffix			
Residence Address			
Locality	LOUDOUN COUNTY		
Mailing Address	Same as Residence		
Email		Phone	
Military, Overseas, or Address Indeliverable or Homeless	Military	Felony conviction or judged mentally incapacitated?	No
Protected Voter Code		Right to vote restored?	
Pollworker Interest		Registered in another state?	No
I swear/affirm, under felony penalty for making willfully false material statements or entries, that the information provided for voter registration is true. I authorize the cancellation of my current registration and I have read the Privacy Act Notice.			
Signature			
Date Submitted	3/6/2024 8:30:57 AM	Transaction #	18563682
		VRA-OVR-2 09/2017	



# Virginia Voter Registration Application

Use blue or black ink

Starred (\*) items are required. If you do not complete all of the items that are marked with \*, your application may be denied. (See instructions on reverse side)

1. ☒ YES ☐ NO ☒ I am a citizen of the United States of America. \* Full social security number [REDACTED] \* Date of birth 10/16/2000 \* Gender male

2. \* Last name [REDACTED] \* First name [REDACTED] \* Middle name [REDACTED] \* Residence address (May include P.O. Box) [REDACTED] Apt. # [REDACTED] \* City/Town [REDACTED] \* State [REDACTED] \* Zip [REDACTED] \* Phone [REDACTED] \* E-mail [REDACTED]

3. \* Have you ever been convicted of a felony or judged mentally incapacitated and disqualified to vote? ☐ YES ☒ NO \* YES, has your right to vote been restored? ☐ YES ☒ NO

4. ☐ I am an active-duty uniformed services member, spouse or dependent, or an overseas citizen.  
☐ I am providing a mailing address (below) because my residence address is not serviced by the U.S. Postal Service or I am homeless.  
☒ I am providing a Virginia P.O. Box (below) to protect my residence address from public disclosure because:  
☐ I am an active or retired law enforcement officer, judge, U.S. or Virginia Attorney General attorney  
☐ I have a court issued protective order for my benefit  
☐ I have evidence of filing a complaint with law enforcement that either I or a household member is in fear for personal safety from another person who has threatened or stalked either me or a household member  
☐ I am a participant in the Virginia Attorney General's Address Confidentiality Program  
 My mailing address (Complete only if you have checked a box in this section)  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

5. ☐ I am currently registered to vote in another state: \_\_\_\_\_ (Indicate state of previous registration)

6. ☐ I am interested in being an Officer of Election (poll worker) on Election Day. (Request confirmation) PCT: 209<sup>00</sup>

7. AFFIRMATION: I swear/affirm, under felony penalty for making willfully false material statements or entries, that the information provided on this form is true. I authorize the cancellation of my current registration and I have read the Privacy Act Notice.

\* Signature [REDACTED] Today's date: 10/11/201

☐ By checking this box, I affirm both that I am an individual with physical disabilities and the information Statement above. Pursuant to Article II, § 2 of the Constitution of Virginia, individuals with physical disabilities are not required to sign the application for voter registrations.

## \* Virginia Voter Registration Application Receipt

The application collector will submit your completed application within 10 days or by the deadline to register for the next election, whichever comes first. You can check your voter registration status online at [elections.virginia.gov/register](http://elections.virginia.gov/register). If you do not receive confirmation of your voter registration status within 30 days, contact your local voter registrar or the Virginia Department of Elections.

Name, phone and e-mail of officer, group or individual receiving application:


Date application received

Thank you for applying to vote in Virginia!

VA-2019A

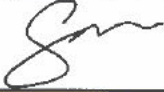
USA-Loudoun-00030



Registration Type			
Voter ID		Registration Date	
SSN		Date of Birth	10/31/2000
Last Name		Gender	F
First Name		US Citizen	Yes
Middle Name			
Suffix			
Residence Address			
Locality	LOUDOUN COUNTY		
Mailing Address	Same as Residence		
Email		Phone	
Military, Overseas, or Address Undeliverable or Homeless	No	Felony conviction or judged mentally incapacitated?	No
Protected Voter Code		Right to vote restored?	
Pollworker Interest		Registered in another state?	No
I swear/affirm, under felony penalty for making willfully false material statements or entries, that the information provided for voter registration is true. I authorize the cancellation of my current registration and I have read the Privacy Act Notice.			
Signature			
Date Submitted	9/24/2024 11:49:59 AM	Transaction #	4624125
			VRA-OVR-2 09/2017


NEW APP.  
 ACTIVE VOTER



Registration Type			
Voter ID		Registration Date	
SSN	[REDACTED]	Date of Birth	10/31/2000
Last Name		Gender	F
First Name		US Citizen	Yes
Middle Name			
Suffix			
Residence Address	[REDACTED]		
Locality	LOUDOUN COUNTY		
Mailing Address	Same as Residence		
Email		Phone	[REDACTED]
Military, Overseas, or Address Undeliverable or Homeless	No	Felony conviction or judged mentally incapacitated?	No
Protected Voter Code		Right to vote restored?	
Pollworker Interest		Registered in another state?	No
I swear/affirm, under felony penalty for making willfully false material statements or entries, that the information provided for voter registration is true. I authorize the cancellation of my current registration and I have read the Privacy Act Notice.			
Signature			
Date Submitted	11/3/2023 11:55:08 AM	Transaction #	18180700
		VRA-OVR-2 09/2017	




**Virginia Voter Registration Application**

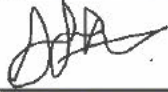
Registration Type			
Voter ID		Registration Date	
SSN		Date of Birth	06/06/2005
Last Name		Gender	
First Name		US Citizen	Yes
Middle Name			
Suffix			
Residence Address			
Locality	LOUDOUN COUNTY		
Mailing Address	Same as Residence		
Email		Phone	
Military, Overseas, or Address Indeliverable or Homeless	No	Felony conviction or judged mentally incapacitated?	No
Protected Voter Code		Right to vote restored?	
Fullworker Interest		Registered in another state?	No
I swear/affirm, under felony penalty for making willfully false material statements or entries, that the information provided for voter registration is true. I authorize the cancellation of my current registration and I have read the Privacy Act Notice.			
Signature			
Date Submitted	10/7/2024 4:39:41 PM	Transaction #	4665233
		VRA-OVR-2 09/2017	

NEW APP.  
ACTIVE VOTER



Registration Type			
Voter ID		Registration Date	
SSN		Date of Birth	06/06/2005
Last Name		Gender	M
First Name		US Citizen	Yes
Middle Name			
Suffix			
Residence Address			
Locality	LOUDOUN COUNTY		
Mailing Address	Same as Residence		
Email		Phone	
Military, Overseas, or Address Indeliverable or Homeless	No	Felony conviction or judged mentally incapacitated?	No
Protected Voter Code		Right to vote restored?	
Pollworker Interest		Registered in another state?	No
I swear/affirm, under felony penalty for making willfully false material statements or entries, that the information provided for voter registration is true. I authorize the cancellation of my current registration and I have read the Privacy Act Notice.			
Signature			
Date Submitted	9/10/2024 12:42:46 PM	Transaction #	4572129
		VRA-OVR-2 09/2017	



Registration Type			
Voter ID		Registration Date	
SSN		Date of Birth	06/06/2005
Last Name		Gender	M
First Name		US Citizen	Yes
Middle Name			
Suffix			
Residence Address			
Locality			
Mailing Address			
Email		Phone	
Military, Overseas, or Address Indeliverable or Homeless	No	Felony conviction or judged mentally incapacitated?	No
Protected Voter Code		Right to vote restored?	
Pollworker Interest		Registered in another state?	No
I swear/affirm, under felony penalty for making willfully false material statements or entries, that the information provided for voter registration is true. I authorize the cancellation of my current registration and I have read the Privacy Act Notice.			
Signature			
Date Submitted	7/13/2023 1:19:28 PM	Transaction #	17803163
		VRA-OVR-2 09/2017	



# Virginia Voter Registration Application

NEW APP. ACTIVE VOTER S N

Use blue or black ink

Starred (\*) items are required. If you do not complete all of the items that are marked with \*, your application may be denied (See instructions on reverse side).

1. ☒ YES ☐ NO  
 \* I am a citizen of the United States of America. \* Full social security number [REDACTED] ☐ No SSN was ever issued. \* Date of birth 08/12/2000 \* Gender Female

2. \* Last name [REDACTED] Jr. Sr. II III IV (Circle if applicable) \* Middle name [REDACTED] ☐ None  
 \* First name [REDACTED] \* Residence address (May not be a P.O. Box) [REDACTED] Apt # [REDACTED]  
 \* City/Town [REDACTED] \* ZIP [REDACTED]  
 E-mail [REDACTED] Phone [REDACTED]

3. \* Have you ever been convicted of a felony or judged mentally incapacitated and disqualified to vote? ..... ☐ YES ☒ NO If YES, has your right to vote been restored? ..... ☐ YES ☐ NO

4. ☐ I am an active-duty uniformed services member, spouse or dependent; or an overseas citizen.  
☐ I am providing a mailing address (below) because my residence address cannot receive mail or I am homeless.  
☐ I am providing a Virginia P.O. Box (below) to protect my residence address from public disclosure because I or a household member is/has:  
☐ An active or retired law enforcement officer, judge, magistrate, U.S. or Virginia Attorney General attorney.  
☐ Been granted a court issued protective order.  
☐ In fear for personal safety from being threatened or stalked by another person.  
☐ A participant in the Virginia Attorney General's Address Confidentiality Program.  
☐ Been approved to be a foster parent.  
☐ A current or former state or local election official, their employee, or Commonwealth official.  
 My mailing address (Complete only if you have checked a box in this section) [REDACTED] PCT 712

5. ☐ I am currently registered to vote in another state: ..... (Indicate state of previous registration) Loudoun County Voter Registration

6. ☐ I am interested in being an Officer of Election (poll worker) on Election Day. Please send me information.

7. AFFIRMATION: I swear/affirm, under felony penalty for making willfully false material statements or entries, that the information provided on this form is true. I authorize the cancellation of my current registration and I have read the Privacy Act Notice.  
 \* Signature [REDACTED] Today's date: 10/07/2024

☐ By checking this box, I affirm both that I am an individual with physical disabilities and the Affirmation Statement above. Pursuant to Article II, § 2 of the Constitution of Virginia, individuals with physical disabilities are not required to sign the application for voter registrations.

## \* Virginia Voter Registration Application Receipt

The application collector must submit your completed application within 10 days or by the deadline to register for the next election, whichever comes first. You can check your voter registration status online at [www.elections.virginia.gov/registration](http://www.elections.virginia.gov/registration). If you do not receive confirmation of your voter registration status within 30 days, contact your local voter registrar or the Virginia Department of Elections.

[REDACTED]

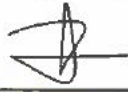
Name, phone and e-mail of office, group or individual receiving application

DATE / /  
 Date application received

Thank you for applying to vote in Virginia

VA-NVRA-10



Registration Type			
Voter ID		Registration Date	
SSN		Date of Birth	08/12/2000
Last Name		Gender	F
First Name		US Citizen	Yes
Middle Name			
Suffix			
Residence Address			
Locality		LOUDOUN COUNTY	
Mailing Address		Same as Residence	
Email		Phone	
Military, Overseas, or Address Indeliverable or Homeless	No	Felony conviction or judged mentally incapacitated?	No
Protected Voter Code		Right to vote restored?	
Pollworker Interest		Registered in another state?	No
I swear/affirm, under felony penalty for making willfully false material statements or entries, that the information provided for voter registration is true. I authorize the cancellation of my current registration and I have read the Privacy Act Notice.			
Signature			
Date Submitted	4/4/2024 8:31:04 AM	Transaction #	18665933
		VRA-OVR-2 09/2017	



jbrown1 | Logout | LOUDOUN COUNTY

[Click to Show PII](#)[Quick Links](#)[Home](#) [Voter Search](#) [Voter Overview](#) [Application](#) [Merge](#) [Absentee](#) [Street File](#)

VERIS\_PROD\_93-2.9.27.1 | 10/13/2024

[Home](#) > [Voter](#) > [Absentee](#) > [Absentee History](#)**Voter Overview**

Name: [REDACTED]  
Voter ID: 014663612  
Date of Birth: XX/XX/2000  
Language Preference: English  
CD: 10 SEN: 032 HSE: 026 Election: STERLING DISTRICT  
**Prohibited Voter - Declared Non-Citizen**

Status: **CANCELLED**  
Locality: **LOUDOUN COUNTY**  
Precinct: 712 - STONE HILL

SSN: [REDACTED]  
Address: [REDACTED]

✓ **Verified**  
**Residential**

Election: 2024 November General

☐ Show All ☒ Display All Localities**Absentee Applications**[In Person Voter](#)

Election	Sent	Received	Status	Status Reason		
<a href="#">2024 November General</a>		9/3/2024	Approved	Online Application - Approved.		

**Ongoing Absentee Applications**

The voter does not currently have any absentee voter applications.

**Absentee Ballots**

Election	Sent	Received	Reissued	Status	Status Reason		
<a href="#">2024 November General</a>	9/16/2024		No	Issued	Issued		



jbrown1 | Logout | LOUDOUN COUNTY

[Click to Show PII](#)[Quick Links](#)[Home](#) [Voter Search](#) [Voter Overview](#) [Application](#) [Merge](#) [Absentee](#) [Street File](#)

VERIS\_PROD\_92-2.9.27.1 | 10/16/2024

[Home](#) > [Voter](#) > [Absentee](#) > [Absentee History](#)**Voter Overview**

Name: [REDACTED]  
 Voter ID: 049966682  
 Date of Birth: XX/XX/2000  
 Language Preference: English  
 CD: 10 SEN: 032 HSE: 026 Election: STERLING DISTRICT

Status: **ACTIVE**  
 Locality: **LOUDOUN COUNTY**  
 Precinct: 712 - STONE HILL

SSN: [REDACTED]  
 Address: [REDACTED]

**Verified**  
**Residential**

Election: 2024 November General

▼ ☐ Show All ☒ Display All Localities**Absentee Applications**[In Person Voter](#)[Add Application](#)

Election	Sent	Received	Status	Status Reason		
2024 November General		10/3/2024	Approved	Approved		


**Ongoing Absentee Applications**

The voter does not currently have any absentee voter applications.

**Absentee Ballots**

Election	Sent	Received	Reissued	Status	Status Reason		
2024 November General	10/7/2024		No	Issued	Issued		

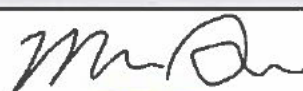


Registration Type			
Voter ID		Registration Date	
SN		Date of Birth	03/25/2006
Last Name		Gender	
First Name		US Citizen	Yes
Middle Name			
Suffix			
Residence Address			
Locality	LOUDOUN COUNTY		
Mailing Address	Same as Residence		
Email		Phone	
Military, Overseas, or Address Undeliverable or Homeless	No	Felony conviction or judged mentally incapacitated?	No
Protected Voter Code		Right to vote restored?	
Pollworker Interest		Registered in another state?	No
I swear/affirm, under felony penalty for making willfully false material statements or entries, that the information provided for voter registration is true. I authorize the cancellation of my current registration and I have read the Privacy Act Notice.			
Signature			
Date Submitted	10/15/2024 3:45:48 PM	Transaction #	4707536
		VRA-OVR-2 09/2017	

NEW APP.  
ACTIVE VOTER



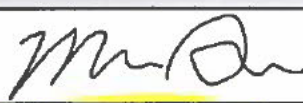
**Virginia Voter Registration Application**

Registration Type			
Voter ID		Registration Date	
SSN		Date of Birth	03/25/2006
Last Name		Gender	F
First Name		US Citizen	Yes
Middle Name			
Suffix			
Residence Address			
Locality	LOUDOUN COUNTY		
Mailing Address	Same as Residence		
Email		Phone	
Military, Overseas, or Address Indeliverable or Homeless	No	Felony conviction or judged mentally incapacitated?	No
Protected Voter Code		Right to vote restored?	
Pollworker Interest		Registered in another state?	No
I swear/affirm, under felony penalty for making willfully false material statements or entries, that the information provided for voter registration is true. I authorize the cancellation of my current registration and I have read the Privacy Act Notice.			
Signature			
Date Submitted	10/15/2024 8:07:45 AM	Transaction #	4702408
		VRA-OVR-2 09/2017	

NEW APP.

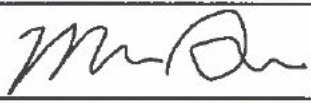
ACTIVE VOTER



Registration Type			
Voter ID		Registration Date	
SSN		Date of Birth	03/25/2006
Last Name		Gender	
First Name		US Citizen	Yes
Middle Name			
Suffix			
Residence Address			
Locality	LOUDOUN COUNTY		
Mailing Address	Same as Residence		
Email		Phone	
Military, Overseas, or Address Indeliverable or Homeless	No	Felony conviction or judged mentally incapacitated?	No
Protected Voter Code		Right to vote restored?	
Pollworker Interest		Registered in another state?	No
I swear/affirm, under felony penalty for making willfully false material statements or entries, that the information provided for voter registration is true. I authorize the cancellation of my current registration and I have read the Privacy Act Notice.			
Signature			
Date Submitted	10/14/2024 7:20:41 PM	Transaction #	4699068
		VRA-OVR-2 09/2017	

DUP  
NEW APP.  
ACTIVE VOTER



Registration Type			
Voter ID		Registration Date	
SSN	[REDACTED]	Date of Birth	03/25/2006
Last Name	[REDACTED]	Gender	F
First Name	[REDACTED]	US Citizen	Yes
Middle Name			
Suffix			
Residence Address	[REDACTED]		
Locality	LOUDOUN COUNTY		
Mailing Address	Same as Residence		
Email		Phone	[REDACTED]
Military, Overseas, or Address Indeliverable or Homeless	No	Felony conviction or judged mentally incapacitated?	No
Protected Voter Code		Right to vote restored?	
Pollworker Interest		Registered in another state?	No
I swear/affirm, under felony penalty for making willfully false material statements or entries, that the information provided for voter registration is true. I authorize the cancellation of my current registration and I have read the Privacy Act Notice.			
Signature			
Date Submitted	12/7/2023 8:16:43 AM	Transaction #	18277426
		VRA-OVR-2 09/2017	



**Virginia Voter Registration Application**

Use blue or black ink

Starred (\*) Items are required. If you do not complete all of the items that are marked with \*, your application may be denied (See instructions on reverse side).

1. ☒ YES ☐ NO *N*  
 \* I am a citizen of the United States of America. \* Full social security number [REDACTED] \* Date of birth 11/10/2005 \* Gender FEMALE  
☐ No SSN was ever issued.

2. \* Last name [REDACTED] Jr. Sr. II III IV (Order if applicable)  
 \* First name [REDACTED] \* Middle name ANJUMAN ☐ None  
 \* Residence address (May not be a P.O. Box) [REDACTED] Apt # [REDACTED]  
 \* City/Town [REDACTED] \* ZIP [REDACTED]  
 E-mail [REDACTED] Phone [REDACTED]

3. \* Have you ever been convicted of a felony or judged mentally incapacitated and disqualified to vote? ..... ☐ YES ☒ NO If YES, has your right to vote been restored? ..... ☐ YES ☐ NO

4. ☐ I am an active-duty uniformed services member, spouse or dependent; or an overseas citizen.  
☐ I am providing a mailing address (below) because my residence address is not serviced by the U.S. Postal Service or I am homeless.  
☐ I am providing a Virginia P.O. Box (below) to protect my residence address from public disclosure because I or a household member is/has:  
☐ An active or retired law enforcement officer, judge, U.S. or Virginia Attorney General attorney.  
☐ Been granted a court issued protective order.  
☐ In fear for personal safety from being threatened or stalked by another person.  
☐ A participant in the Virginia Attorney General's Address Confidentiality Program.  
☐ Been approved to be a foster parent.

My mailing address (Complete only if you have checked a box in this section)  
[REDACTED]

5. ☐ I am currently registered to vote in another state: \_\_\_\_\_. (Indicate state of previous registration)

6. ☐ I am interested in being an Officer of Election (poll worker) on Election Day. Please send me information. Voter Said Yes

7. AFFIRMATION: I swear/affirm, under felony penalty for making willfully false material statements or entries, that the information provided on this form is true. I authorize the cancellation of my current registration and I have read the Privacy Act Notice. to Citizenship Summary

\* Signature [REDACTED] Today's date: 09/27/2024

☐ By checking this box, I affirm both that I am an individual with physical disabilities and the Affirmation Statement above. Pursuant to Article II, § 2 of the Constitution of Virginia, individuals with physical disabilities are not required to sign the application for voter registrations. *S*

NEW APP.  
ACTIVE VOTER




[Home](#) | [Voter Search](#) | [Voter Overview](#) | [Application](#) | [Merge](#) | [Absentee](#) | [Street File](#)

VERIS\_PROD\_93-2.9.27.1 | 10/13/2024

**Home > Voter > Absentee > Absentee History****Voter Overview**

Name: [REDACTED] Status: **CANCELLED**  
 Voter ID: 220237834 Locality: **LOUDOUN COUNTY**  
 Date of Birth: XX/XX/2005 Precinct: 716 - RIDGETOP  
 Language Preference: English

 SSN: [REDACTED]  
 Address: [REDACTED]

**Verified  
Residential**

CD: 10 SEN: 032 HSE: 028 Election: STERLING DISTRICT

**Prohibited Voter - Declared Non-Citizen**

Election: 2024 November General

☐ Show All 
☒ Display All Localities**Absentee Applications**

In Person Voter

Election	Sent	Received	Status	Status Reason		
<u>2024 November General</u>		7/24/2024	Approved	Online Application - Approved.		



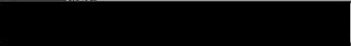


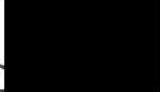
**Ongoing Absentee Applications**

The voter does not currently have any absentee voter applications.

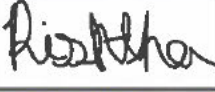
**Absentee Ballots**

Election	Sent	Received	Reissued	Status	Status Reason		
<u>2024 November General</u>	9/16/2024		No	Issued	Issued		



Registration Type			
Voter ID		Registration Date	
SSN		Date of Birth	11/10/2005
Last Name		Gender	F
First Name		US Citizen	Yes
Middle Name			
Suffix			
Residence Address			
Locality	LOUDOUN COUNTY		
Mailing Address	Same as Residence		
Email		Phone	
Military, Overseas, or Address Indeliverable or Homeless	No	Felony conviction or judged mentally incapacitated?	No
Protected Voter Code		Right to vote restored?	
Pollworker Interest	No	Registered in another state?	No
I swear/affirm, under felony penalty for making willfully false material statements or entries, that the information provided for voter registration is true. I authorize the cancellation of my current registration and I have read the Privacy Act Notice.			
Signature	 		
Date Submitted	7/24/2024 4:13:11 PM	Transaction #	4516361
		VRA-OVR-2 09/2017	



Registration Type			
Voter ID		Registration Date	
SSN		Date of Birth	11/10/2005
Last Name		Gender	F
First Name		US Citizen	Yes
Middle Name			
Suffix			
Residence Address			
Locality	LOUDOUN COUNTY		
Mailing Address	Same as Residence		
Email		Phone	
Military, Overseas, or Address Indeliverable or Homeless	No	Felony conviction or judged mentally incapacitated?	No
Protected Voter Code		Right to vote restored?	
Pollworker Interest		Registered in another state?	No
I swear/affirm, under felony penalty for making willfully false material statements or entries, that the information provided for voter registration is true. I authorize the cancellation of my current registration and I have read the Privacy Act Notice.			
Signature			
Date Submitted	7/20/2023 2:08:47 PM	Transaction #	17828553
		VRA-OVR-2 09/2017	



Registration Type			
Voter ID		Registration Date	
SSN	[REDACTED]	Date of Birth	01/17/1946
Last Name	[REDACTED]	Gender	M
First Name	[REDACTED]	US Citizen	Yes
Middle Name	[REDACTED]		
Suffix	[REDACTED]		
Residence Address		[REDACTED]	
Locality	FAIRFAX COUNTY		
Mailing Address	Same as Residence		
Email	[REDACTED]	Phone	[REDACTED]
Military, Overseas, or Address Undeliverable or Homeless	No	Felony conviction or judged mentally incapacitated?	No
Protected Voter Code		Right to vote restored?	
Pollworker Interest		Registered in another state?	No
I swear/affirm, under felony penalty for making willfully false material statements or entries, that the information provided for voter registration is true. I authorize the cancellation of my current registration and I have read the Privacy Act Notice.			
Signature	[REDACTED]		
Date Submitted	10/10/2024 5:08:07 PM	Transaction #	4681218
			VRA-OVR-2 09/2017

NEW APP.  
 ACTIVE VOTER



Registration Type	UPDATE		
Voter ID	303010145	Registration Date	
SSN	[REDACTED]	Date of Birth	01/17/1946
Last Name	[REDACTED]	Gender	M
First Name	[REDACTED]	US Citizen	
Middle Name	[REDACTED]		
Suffix	[REDACTED]		
Residence Address	[REDACTED]		
Locality	LOUDOUN COUNTY		
Mailing Address	Same as Residence		
Email		Phone	
Military, Overseas, or Address Undeliverable or Homeless		Felony conviction or judged mentally incapacitated?	
Protected Voter Code		Right to vote restored?	
Pollworker Interest		Registered in another state?	
I swear/affirm, under felony penalty for making willfully false material statements or entries, that the information provided for voter registration is true. I authorize the cancellation of my current registration and I have read the Privacy Act Notice.			
Signature	[REDACTED]		
Date Submitted	1/9/2019 11:28:35 AM	Transaction #	11950139
			VRA-OVR-2 09/2017



